



UNITED STATES OF AMERICA

TEMPORARY DUTY (TDY) OFFICIAL TRAVEL AUTHORIZATION
U.S. Department of State

(AGENCY)

2. TRAVEL NO.:

1001 199505

Allotment

Obligation

3. DATE

10/17/80

You are hereby authorized to perform official travel at Government expense as indicated herein. Unless otherwise noted, all expenses and the maximum per diem under the regulations are authorized.

4. NAME, TITLE, AND ADDRESS (Home address for non-Government personnel)

Mr. Samuel Berger

U.S. Department of State

Washington, D.C.

S/P

5. AUTHORIZING OFFICE

6. SOC. SEC. NUMBER

7. APPLICABLE REGULATIONS

☐ FSTR☐ FTR

OTHER

(Specify)

8. ITINERARY, PURPOSE, REMARKS AND SPECIAL INSTRUCTIONS AND AUTHORIZATIONS

Itinerary: From Washington, D.C., on or about October 20, 1980, to Chicago, Ill., St. Louis, Mo., Milwaukee, Wis., and return to Washington, D.C., on or about October 21, 1980.

Purpose: To accompany the Secretary of State

TRAVEL VIA MILITARY AND/OR COMMERCIAL AIR AUTHORIZED

THE USE OF TAXICABS BETWEEN PLACE OF LODGING AND PLACE OF OFFICIAL BUSINESS AND BETWEEN PLACES OF OFFICIAL BUSINESS AUTHORIZED

PER DIEM IN LIEU OF SPECIAL LOCALITY SUBSISTENCE IS AUTHORIZED

9. LIQUIDATION RECORD

Date (A)	Description (B)	Posted By (C)	Obligation Authorized (D)	Obligation Liquidated (E)	Unliquidated Balance (F)
	DEPARTMENT OF STATE(B)A/CDC/MR				
	REVIEWED BY Tolman DATE 2/1/81				
	RDS or XDS EXT. DATE				
	TS AUTH. REASON(S)				
	ENDORSE EXISTING MARKINGS				
	DECLASSIFIED RELEASABLE				
	RELEASE DENIED				
	PA or FOI EXEMPTIONS				

10. TRAVEL REQUESTED BY

Name: Robert Aylmer
Title: Staff Assistant

11. FUNDS AVAILABLE

Name: Albert Jarek
Title: Budget Officer

12. AUTHORIZING OFFICER

Name: Albert Jarek
Title: Budget Officer

13. ACCOUNTING CLASSIFICATION CODES - The coding (A through D) must be shown on all documents issued under this authority and must appear on all vouchers, invoices, TR's, GB/L's, etc. (For USIA, A through F must be shown.)

A. Appropriation	B. Allotment	C. Obligation	D. Organization/Function (USIA: Sub-Cost/Activity Center)	E. Object (USIA: Function)	F. Sub-Subject (USIA: Resource)	G. Amount
1913113	1001	199505	010101	2151		\$50.00

OPTIONAL FORM 144 (Rev. 12-77)

Dept. of State

SEE REVERSE FOR PRIVACY STATEMENT

COPY 6 - ORIGINATING OFFICE

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